

# LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.  
Registrations expire on January 31 unless a renewal is  
submitted between December 1 and January 31, 1999

## Instructions

- Print in ink or type.
- Complete form, have it notarized and return with \$10 registration fee to the Board of Ethics, 8401 United Plaza Blvd., Suite 200 Baton Rouge, LA 70809-7017, (225) 922-1400.
- Initial registrations must be submitted within 5 days of (1) employment as a lobbyist or (2) first action requiring registration. Renewals must be submitted between December 1 and January 31.

1. NAME Henderson Russell 3  
Last First MI

2. BUSINESS PHONE 504 943 6398  
Area Code and Phone Number

3. BUSINESS ADDRESS Box 15030 New Orleans, LA 70175  
Street and No. City State Zip

4. EMPLOYER Self

5. EMPLOYER'S ADDRESS Same  
Street and No. City State Zip

6. LIST BELOW (a) Names of persons, groups, or organizations which you represent; (b) the address of each such person, group, or organization you represent; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the client or someone else pays you to lobby.

1. Name Asenda for Children

Address \_\_\_\_\_

Business or purpose Improving quality of life of children

Does this person pay you? yes

If No, who pays you? \_\_\_\_\_

2. Name \_\_\_\_\_

Address \_\_\_\_\_

Business or purpose \_\_\_\_\_

Does this person pay you? \_\_\_\_\_

If No, who pays you? \_\_\_\_\_

490  
Lobbyist's Registration Number

FOR OFFICE USE ONLY

Postmark Date: 4-14-99

Reg

1990947

#1396  
\$10.00  
KSD

99 APR 15 AM 1:50

ETHICS  
CLERK  
204

# LOBBYING REGISTRATION FORM

Lobbyist's Registration Number

3. Name \_\_\_\_\_  
Address \_\_\_\_\_  
Business or purpose \_\_\_\_\_  
Does this person pay you? \_\_\_\_\_  
If No, who pays you? \_\_\_\_\_
4. Name \_\_\_\_\_  
Address \_\_\_\_\_  
Business or purpose \_\_\_\_\_  
Does this person pay you? \_\_\_\_\_  
If No, who pays you? \_\_\_\_\_
5. Name \_\_\_\_\_  
Address \_\_\_\_\_  
Business or purpose \_\_\_\_\_  
Does this person pay you? \_\_\_\_\_  
If No, who pays you? \_\_\_\_\_

State of Louisiana

Parish of Orleans

Before me, the undersigned authority, personally came and appeared Russell Henderson, who, after being duly sworn by me, did declare and acknowledge to me that the above statements are true and correct.

Russell J. Henderson  
Signature of Lobbyist

Sworn to and subscribed before me on this 10 day of  
April, 1999.

Andrew J. Marshall  
Notary Public

Rev. 8/97

ATTACH  
2" x 2"  
PHOTOGRAPH  
HERE  
FOR  
INITIAL  
REGISTRATION  
ONLY